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CLEVELAND, O	H 44115			Georgeen B. Sonntag (Depositor's name)			
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			<u> </u>	February 18, 2	2009	009 (Date)	
APPLICATION NO.	TION NO. FILING DATE		FIRST NAMED INVENTOR	АТТО	RNEY DOCKET NO.	CONFIRMATION NO.	
09/726,233 TITLE OF INVENTION:	11/29/2000 PARTIAL PRINT PRO	OVIDER	Christine Miyachi	XE	R-20374D/A0600	9612	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$0	\$0	\$1510	04/27/2009	
EXAMINER ART UNIT		ART UNIT	CLASS-SUBCLASS				
WORKU, NEGUSSIE		2625	358-001150				
. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
Number is required. ASSIGNEE NAME AN	ID RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or type	ne)			
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(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
XEROX CORPORATION NORWALK, CT							
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